

HOWISON & ARNOTT, L.L.P.

A LIMITED LIABILITY PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

ATTORNEYS AT LAW
PATENT AND TRADEMARK MATTERS

FACSIMILE COVERSHEET

DATE: October 17, 2008

TO:	Kim T. Huynh	FROM:	Deborah DeArmond on behalf of Gregory Howison
COMPANY:	USPTO	DIRECT DIAL:	(972) 680-6068
FAX NUMBER:	(571) 273-3635	FAX NUMBER:	(972) 479-0464
TOTAL PAGES:	2	CLIENT/MATTER:	S/N: 10/625,580 CYGL-26,370

COMMENTS

Ms. Huynh:

Faxed herewith please find Mr. Howison's Interview Request Form. Should October 29, 2008 be unavailable, October 30 would be our next proposed date.

Your response will be appreciated.

Sincerely,

Deborah DeArmond
Legal Assistant

The information contained in or attached to this FAX message is intended only for the confidential use of the individual(s) named above. If you are not the named recipient or an agent responsible for delivering it to the named recipient, you are hereby notified that you have received this document in error and that review, dissemination or copying of this communication is prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original documents to us by mail. Thank you.

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PTOL-413A (09-08)

Approved for use through 10/31/2008. OMB 0551-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Applicant Initiated Interview Request Form

Application No.: CYGL-26,370-10/1095,580 First Named Applicant: DANIEL LUNECKI
 Examiner: KIM T. HUYNH Art Unit: 2111 Status of Application: PENDING

Tentative Participants:

(1) GREGORY M. HOWISON (2) _____
 (3) _____ (4) _____

Proposed Date of Interview: 10/29/2008 Proposed Time: 1:30 P.M. AM/PM

Type of Interview Requested:

(1) ☐ Telephonic (2) ☒ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☐ NO

If yes, provide brief description: _____

Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>103(a)</u>	<u>Claims 16-25</u>	<u>Bacon & Nilsson</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) <u>103(a)</u>	<u>Claims 1-14</u>	<u>Bacon Ware Nolan Nilsson</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

Brief Description of Argument to be Presented:

Different time bases are one of the distinguishing aspects

An interview was conducted on the above-identified application on _____.

NOTE: This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

 Applicant/Applicant's Representative Signature

GREGORY M. HOWISON

 Typed/Printed Name of Applicant or Representative
 30,646

 Registration Number, if applicable

 Examiner/SPE Signature

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.